

**MEDICAL DIRECTION COMMISSION
MINUTES
April 26, 2002
1647 E. Morten, Training Room**

Members Present: Dr. Michel Sucher (Chairman), Dr. Robert Vavrick, Dr. Peter Vann, Dr. Michael Ward, and Dr. Wendy Ann Lucid.

Members Absent: Dr. Harvey Meislin, Dr. Barry Kriegsfeld, Dr. John Raife, Dr. Phillip Richemont, and Dr. Frank Walter.

Ex-Officio Members Present: Dr. Richard Thomas and Dr. Kay Lewis.

Guests Present: Holly Gibeaut, Mark Venuti, Dr. John Gallagher, Linda Worthy, Kevin Keeley, Ed Neville, Dr. Toni Brophy, Brian Smith, Terry Mason, and Jim Roeder.

BEMS Staff Present: Dr. Judi Crume, Donna Meyer, Dona Marie Markley, Susan Nicolas, Peggy Lahren, Karen Nelson, Chuck Kramer, Howard Schwartz, and Larry Heidenberg.

I. CALL TO ORDER

The Chairman, Dr. Sucher, called the regular meeting of the Medical Direction Commission to order at 1:10 p.m. A quorum was present.

II. DISCUSS/AMEND and/or APPROVAL OF MINUTES

A motion was made by Dr. Vavrick, seconded by Dr. Kay Lewis to approve the minutes and the agenda. Motion carried.

III. REPORT FROM THE OFFICE OF THE DIRECTOR

- The 2003 budget has not been developed and approved
- The Tobacco Tax initiative is being worked on
- The Division of Public Health, Department of Health Services, has just completed two major grants
 - HRSA – Hospital Bioterrorism Preparedness
 - CDC - Bioterrorism

IV. CHAIRMAN'S REPORT

- A. Membership Updates** – Dr. McLaughlin resigned from Medical Direction Commission and Emergency Medical Services Council. There are two vacancies on MDC in the category of “EMS Physician Specializing in Trauma” and “Physician Specializing in Emergency Medicine – Also an EMS Council Member”.
- B. Bylaws Review** – The Bureau is in the process of looking at the bylaws of the statutory committees and the subcommittees. It has been recommended that the EMS Council Executive Committee look at the Bylaws for revision. Dr. Vavrick and Dr. Kay Lewis are representatives from MDC that are also on the EMS Council Executive Committee that will be doing the review.

V. COMMITTEE REPORTS

Protocols, Medications, and Devices Committee:

- A. **Nasal Narcan** – A motion was made by Dr. Vavrick, seconded by Dr. Lucid recommending that the profile include nasal narcan atomizer device generic or any other approved methodology.

Motion carried.

- B. **RSI Pilot Project** – A motion was made by Dr. Vavrick, seconded by Dr. Ward to delete the 2 year time experience requirement for the RSI pilot project.

Motion carried.

In a previous set of minutes it was stated that there would be status reports every six months for the RSI pilot project and updates given at every meeting for any adverse effects of the study. Dr. Brophy stated that, in the pilot project she is conducting, there have been no adverse effects so far. There was discussion within the committee about the mechanism to report on the project from the organizations that are doing it. In the past, pilot programs have presented the number of incidents and the results every two years.

Follow Up: Report Adverse Effects of the RSI Pilot Project

When: Next Agenda – June 21, 2002

Dr. Gallagher's region has not started due to budget constraints. Dr. Brophy stated that East Valley (Gilbert 4, Chandler 17, Apache Junction 8) started the Pilot Project in January after they all had been trained. Mesa 21 (started in January after training) – 3 Failed Intubations with the majority in the 55 and over age group. A failed attempt was handled with a combitube. Guardian has retrained so they are just starting the Pilot Program.

It was recommended that the Bureau review other state data. Questions on whether the Medical Director for the course will limit a paramedic from performing a certain skill. If that would be the case then wouldn't the paramedic need to be retrained. Dr. Ward stated that there had been 9 intubations in his area that had no adverse effects in regards to airways.

- C. **Change of Drug Box List for Activated Charcoal**

A motion was made by Dr. Wendy Lucid, seconded by Dr. Vavrick to approve these changes in the drug profile under Adverse Reactions: delete "Messy" replace with "May Provoke Vomiting" and delete "Black Stools" replace with "May Worsen Overdosed Induced Ileus". **Motion carried.**

- D. **Glucagon in OD Situation**

A motion was made by Dr. Vann, seconded by Dr. Lucid to delete sections referring to Beta Blocker OD from the Glucagon Drug Profile under: Indications and Field Use, Adult Dosage Routes of Administration, and Special Notes.

Motion Carried.

VI. OLD BUSINESS

A. Pediatric Dosage for Versed Drug Profile

A motion was made by Dr. Vavrick, seconded by Dr. Wendy Lucid to add this to the Versed Drug Profile as a Pediatric Dosage: 0.05 to 0.1mg/kg slow IV push for seizures or .2 mg/kg IM and add anticonvulsant back in as an indication for adults and kids. **Motion carried.**

Follow Up: Final Draft of Drug Profiles

When: Next MDC Meeting – June 21, 2002

Recommended adding references to the drug profiles if it is going to be evidence based.

Follow Up: PMD Committee

When: Next Meeting – May 16, 2002

What: Assign Member of PMD

B. Waivers through the Director to Address Drug Shortage and Comparable Substitutes

– Questions on whether or not you can use versed even if you have valium? According to the waiver, versed is only to be used if valium is not available. On January 25, 2002 it was voted to add versed to the drug box as an optional drug. Currently the way our statutes and rules exist only the drugs listed in the exempt rule 803 drug box list can be used. The process for Hazmat has not been completed as of yet. In order to complete this process, the Bureau approves this then there is a rule change as an optional drug. The process should take 10 days or longer. The Department of Health Services then sends a letter out with an updated drug list. The only better drug is ativan but it has to be refrigerated

C. Bumetanide drug profile approval

– Bumetanide works equally well as a diuretic.

A motion was made by Dr. Vavrick, seconded by Dr. Wendy Lucid to see approval of the draft drug profile with one correction on page 2 under Special Notes, last line, 1 mg bumetanide should read 1.0 mg.

Motion carried.

VII. NEW BUSINESS

A. Change Date of Next Meeting from June 21st to June 18th or June 19th at 1:00 p.m.

– The next meeting's date will not change it will stay at the scheduled date June 21, 2002 and Dr. Vavrick will be chairing both the EMS Council and MDC meetings.

B. PMD Bylaws Change

A motion was made by Dr. Lucid, seconded by Dr. Vavrick to approve changing the category from "Representative From State Pharmacy Board" to "Pediatric Emergency Medicine".

Motion carried.

C. Revise Drug Box Lists to Adhere to New I-EMT Curricula

A motion was made by Dr. Vavrck, seconded by Dr. Lucid to approve that New EMTs and existing Intermediates (after completion of the transition course) will have a monitor/defibrillator, a full paramedic drug box, and the education to use both items and to revise the drug box list to adhere to New I-EMT Curricula.

Motion carried.

D. Arizona 2001 Intermediate EMT and the Interfacility Transport List

A motion was made by Dr. Wendy Lucid, seconded by Dr. Vavrck to revise the IFTL to allow upgrade and new I-EMTs to transport all the drugs on the list, but only when administered through a peripheral line.

Motion carried.

E. “Administration of Medication by ALS Candidate”

A motion was made by Dr. Wendy Lucid, seconded by Dr. Vavrck to allow students to administer drugs under the supervision of the designated preceptor and according to the approval of the medical director.

Motion carried.

Any change to the drug box is an exempt rule change. Question on the liability issues involved. All the clinical agreements with the hospital address that students are giving medications under the guidance of a preceptor and medical direction. It is also clarified if the paramedic or nurse is working as a medic preceptor or a nurse preceptor. Recommended using similar language that was drafted for Hazmat rulemaking.

VIII. CALL TO THE PUBLIC

AEMS 2nd Annual EMS Odyssey will held June 13th and 14th at the Embassy Suites.

Dr. Gallagher requests from the Bureau that if the Director makes a change such as a waiver that notification be sent out to all the appropriate agencies. Recommended e-mailing the proper agencies as soon as possible.

IX. NEXT MEETING

The next regular meeting of the Medical Direction Commission is scheduled for June 21, 2002.

X. ADJOURNMENT

A motion was made and seconded to adjourn the meeting at 2:40 p.m.

Motion carried.

Approved by MDC on 6/21/02